

POSITION	INITIALS	ID NO.	DATE
	<i>AS</i>		<i>08/16/00</i>
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>ECN</i>	<i>11</i>	<i>8/19/00</i>
FORMALITY REVIEW	<i>RT</i>	<i>515</i>	<i>82-29-00</i>
RESPONSE FORMALITY REVIEW	<i>LH</i>	<i>60105</i>	<i>3-1-01</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	✓
2	✓	✓	✓
3	✓	✓	✓
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Best Available Copy

If more than 150 claims or 10 actions
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